

Message: Updated Invoice Template for June**✉ Updated Invoice Template for June****From**

Kraft, Emily

Date Wednesday, May 31, 2017 2:07 PM**To**

Laura Griggs

Cc[FMC Invoice Template.xlsx](#) (15 Kb HTML)

Hi Laura,

I have attached a revised invoice template with the additional funding that you requested. I have plugged in the amount I have recorded for your previously invoiced total, so please review to ensure it matches your records, sign, and return.

Thanks,

Emily Kraft

*Alternatives to Abortion Program Manager
Truman Building, Room 430
Jefferson City, MO 65102
Phone: (573) 522-0003*

Invoice

A	B	C	D	E	F	G	H	I	J	K	L	M
				<u>Alternatives to Abortion Invoice</u>								
1												
2												
3	Contract #	CS170042003				Vendor Name:	Faith Maternity Care					
4	Vendor Number:	13421808001/MB00099548				Vendor Address:	1900 Lake Dr					
5							Fulton, MO					
6							65251					
7	Bill To:	Office of Administration										
8		Commissioner's Office										
9		201 W. Capitol Ave, Room										
10		125 Jefferson City, MO										
11		65101										
12	Invoice Number:											
13	Invoice Date:											
14	Service Period:											
15												
16												
17	Total Contracted Allocation		Prior Invoiced Total		June Award Amount							
18												

20	Quarterly expenditure	\$ -

21 adjustment:

22

23 Total Due: **\$ 13,724.34**

24

Allocation

25 Remaining

26

27

28

29

30 Signature:

31

32

33

34